## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10-784-258

| CLAIMS AS FILED - PART I   |  |                                 |                              |                                    |            |                  | :     | SMALL E     | ENTITY                 |                  | OTHER                      | THAN                   |
|--|--|---------------------------------|------------------------------|------------------------------------|------------|------------------|-------|-------------|------------------------|------------------|----------------------------|------------------------|
| _  | ·  |                                 | (Column 1)                   |                                    | (Colu      | (Column 2)       |       | TYPE        |                        | OR               | OTHER THAN OR SMALL ENTITY |                        |
| TOTAL CLAIMS   |  |                                 | 21                           |                                    |            |                  |       | RATE        | FEE                    | 7                | RATE                       | FEE                    |
| FOR  |  |                                 | NUMBER FILED                 |                                    | NUME       | BER EXTRA        |       | BASIC FE    | E 385.00               | OR               | BASIC FEE                  | 770.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |                                 | 26 minus 20= *               |                                    | *          | 6                |       | XS 9=       |                        | OR               | X\$18=                     | 108                    |
| INDEPENDENT CLAIMS   |  |                                 | 4 minus 3 =                  |                                    | *          | -1               |       | X43=        |                        | OR               | X86=                       | 8.6                    |
| М  | ULTIPLE DEPE                                   | NDENT CLAIM P                   | RESENT                       |                                    |            | $\boxtimes$      |       | +145=       |                        | OR               | +290=                      | 290                    |
| * 1:   | f the difference                               | e in column 1 is                | less than zero, enter "0" in |                                    |            | column 2         | L     | TOTAL       | <del> </del>           | OR               | TOTAL                      | 1254                   |
| CLAIMS AS AMENDED - PART II  |  |                                 |                              |                                    |            |                  |       |             |                        | _                | OTHER                      | THAN                   |
| _  | ···  | (Column 1)                      | T                            | (Colum                             | ın 2)      | (Column 3)       | · _   | SMALL       | ENTITY                 | OR               | SMALL                      |                        |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT |                              | HIGHE<br>NUMB<br>PREVIOI<br>PAID F | ER<br>USLY | PRESENT<br>EXTRA |       | RATE        | ADDI-<br>TIONAL<br>FEE |                  | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *                               | Minus                        | **                                 |            | =                |       | X\$ 9=      |                        | OR               | X\$18=                     |                        |
| AME  | Independent                                    | *<br>ENTATION OF MU             | Minus                        | PENDENT                            | CL AIM     | =                |       | X43=        |                        | OR               | X86=                       |                        |
|  |  | ۱ [                             | +145=                        |                                    | OR         | +290=            |       |             |                        |                  |                            |                        |
|  |  |                                 |                              |                                    |            |                  | L     | TOTAL       | <del></del>            | ا <sub>ت</sub> ا | TOTAL                      |                        |
|  |  | (0-1 4)                         |                              |                                    |            |                  | Al    | DDIT. FEE   | L                      | OR ,             | ADDIT. FEE                 |                        |
|  |  | (Column 1) CLAIMS               |                              | (Colum:                            |            | (Column 3)       |       |             |                        |                  | _                          |                        |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT |                              | NUMBI<br>PREVIOL<br>PAID FO        | ER<br>JSLY | PRESENT<br>EXTRA |       | RATE        | ADDI-<br>TIONAL<br>FEE |                  | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *                               | Minus                        | **                                 |            | =                |       | X\$ 9=      |                        | OR               | X\$18=                     |                        |
| AME  | Independent                                    | *<br>NTATION OF MU              | Minus                        | ###                                | 21 0104    | = .              |       | X43=        |                        | OR               | X86=                       |                        |
|  | THOTTHESE                                      | ·                               | LIPLE DEP                    | ENDENT                             | LAIM       |                  |       | +145=       |                        | OR               | +290=                      |                        |
|  |  |                                 |                              |                                    |            |                  |       | TOTAL       | ·                      | OR .             | TOTAL                      |                        |
|  |  | AL                              | DIT. FEE                     |                                    | , μ        | DDIT. FEE        |       |             |                        |                  |                            |                        |
| П  | `  | (Column 1) CLAIMS               |                              | (Column                            |            | (Column 3)       |       |             | ٠.                     |                  |                            |                        |
| AMENDMENT C  |  | REMAINING<br>AFTER<br>AMENDMENT |                              | NUMBE<br>PREVIOU<br>PAID FO        | R          | PRESENT<br>EXTRA |       | RATE        | ADDI-<br>TIONAL<br>FEE |                  | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *                               | Minus                        | **                                 |            | =                |       | X\$ 9=      |                        | OR               | X\$18=                     |                        |
| AME  | Independent                                    |                                 | Minus                        | ***                                |            | =                |       | X43=        |                        | . t              | X86=                       |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                 |                              |                                    |            |                  |       |             |                        | OR -             | 700-                       |                        |
| • If   | the entry in colum                             | . Lt                            | 145=                         |                                    | OR L       | +290=            |       |             |                        |                  |                            |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |                                 |                              |                                    |            |                  |       |             |                        |                  |                            |                        |
| •  | i iigiiest ivumi                               | Del Freviously Palo             | FUT (TOTAL OF                | maependent                         | ) is the h | ignest number    | tound | in the appi | opriate box            | in colu          | mn 1.                      |                        |